



Docket No.: M4065.0356/P356
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Roger Lee

Application No.: 09/805,914

Art Unit: 2823

Filed: March 15, 2001

Examiner: F. Toledo

For: SELF-ALIGNED MRAM CONTACT AND
METHOD OF FABRICATION

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated July 23, 2003 (Paper No. 11), please reconsider the above-identified U.S. patent application in view of the following remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks section begins on page 8 of this paper.



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AMENDMENT TRANSMITTAL LETTER				Docket No. M4065.0356/P356	
Application No. 09/805,914-Conf. #2911	Filing Date March 15, 2001	Examiner F. Toledo	Art Unit 2823		
Applicant(s): Roger Lee					
Invention: SELF-ALIGNED MRAM CONTACT AND METHOD OF FABRICATION					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	42	- 42 =		x	0.00
Independent Claims	2	- 3 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Thomas J. D'Amico Attorney Reg. No.: 28,371 DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 828-2232				Dated: <u>October 18, 2003</u>	